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SCHEDULE B (FEC Form 3X)	Harana and a sala adala (a)		IE NUMBER: PAGE1930060F193526						
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(checl	only one	22 <u> </u>	□ 24	24 25 26			
	Detailed Summary Page		27 X	28a	23 28b	280	, -	29	30b
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or for commercial purposes, other than using the name	ne and address of any politica	al commit	ee to soli	it contr	ibutions	from su	uch c	ommitte	ee.
NAME OF COMMITTEE (In Full)									
/ ActBlue									
Full Name (Last, First, Middle Initial)									
A. ROCHELLE ROTHBAUM			D	Date of Disbursement O2 O4 2015					
Mailing Address 294 RICHARD CT			- [
City	State Zip Code				15	0000			
POMONA	NY 10970			ransac	ction ID	: SB28/	1_243	363129	
Purpose of Disbursement Contribution Refund			A	nount o	of Each	Disburs	emen	t this P	eriod
Candidate Name		Categor Type	y/		,	,		1.	.00
	nent For: Primary General Other (specify) ▼			fund of 004012		ution, ini	tially e	earmark	ked for ACT
State: District:									
Full Name (Last, First, Middle Initial) ROCHELLE ROTHBAUM			D	ate of D	Disburse	ement			
Mailing Address 296 RICHARD CT			- [02	/ D C	D /		2015	Y
	State Zip Code			Fransac	ction ID	: SB28	A_243	367418	
POMONA Purpose of Disbursement	NY 10990								
Contribution Refund			A	nount o	of Each	Disburs	emen	t this P	Period
Candidate Name		Categor Type	y/		,	,		50	.00
	nent For: Primary General Other (specify) ▼		D	MOCR					ked for AMPAIGN
Full Name (Last, First, Middle Initial) - ROCHELLE ROTHBAUM			D	ate of D	Disburse	ement			
Mailing Address 296 RICHARD CT			- [02	/ D 0	^D /		015	Y
City State Zip Code POMONA NY 10990				Transaction ID : SB28A_24371330					
Purpose of Disbursement Contribution Refund	10990	· · ·	╡.			5			
Candidate Name		Categor Type		nount o	of Each	Disburs	emen	-	eriod .00
Office Country House	ment For:		T R	fund of	contrib	ution, ini	ially e	earmark	ked for
Senate President	Primary General Other (specify) ▼		D	MOCR	ATIC S	ENATOR	RIAL (IGN
Senate			D	MOCR	ATIC S		RIAL (IGN